

<b>PATENT APPLICATION FEE DETERMINATION RECORD</b> Effective October 1, 2000					Application or Docket Number <b>09728852</b>
<b>CLAIMS AS FILED - PART I</b> (Column 1) (Column 2)					<b>SMALL ENTITY</b> <b>TYPE</b> <input type="checkbox"/> <b>OTHER THAN</b> <b>SMALL ENTITY</b>
TOTAL CLAIMS		21			<b>RATE</b> <input type="checkbox"/> <b>FEES</b> <b>BASIC FEE</b> 355.00 X\$ 9= <input type="checkbox"/> X40= <input type="checkbox"/> +135= <input type="checkbox"/> <b>TOTAL</b> <input type="checkbox"/>
FOR		NUMBER FILED	NUMBER EXTRA		<b>RATE</b> <input type="checkbox"/> <b>FEES</b> <b>BASIC FEE</b> 710.00 X\$18= <input type="checkbox"/> X80= <input type="checkbox"/> +270= <input type="checkbox"/> <b>TOTAL</b> <input type="checkbox"/> <b>28.00</b>
TOTAL CHARGEABLE CLAIMS		21 minus 20=	* 1		
INDEPENDENT CLAIMS		3 minus 3=	* 0		
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>					
* If the difference in column 1 is less than zero, enter "0" in column 2					
<b>CLAIMS AS AMENDED - PART II</b> (Column 1) (Column 2) (Column 3)					<b>SMALL ENTITY</b> <b>OR</b> <b>OTHER THAN</b> <b>SMALL ENTITY</b>
<b>AMENDMENT A</b>	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	<b>RATE</b> <input type="checkbox"/> <b>ADDI-</b> <b>TIONAL</b> <input type="checkbox"/> <b>FEES</b> X\$ 9= <input type="checkbox"/> X40= <input type="checkbox"/> +135= <input type="checkbox"/> <b>TOTAL</b> <input type="checkbox"/>	
	Total * <input type="checkbox"/> Minus <input type="checkbox"/> ** <input type="checkbox"/> = <input type="checkbox"/>	* <input type="checkbox"/> Minus <input type="checkbox"/> ** <input type="checkbox"/> = <input type="checkbox"/>	* <input type="checkbox"/> Minus <input type="checkbox"/> *** <input type="checkbox"/> = <input type="checkbox"/>	<b>RATE</b> <input type="checkbox"/> <b>ADDI-</b> <b>TIONAL</b> <input type="checkbox"/> <b>FEES</b> X\$18= <input type="checkbox"/> X80= <input type="checkbox"/> +270= <input type="checkbox"/> <b>TOTAL</b> <input type="checkbox"/> <b>ADDI.</b> <input type="checkbox"/>	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>					
<b>AMENDMENT B</b>	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	<b>RATE</b> <input type="checkbox"/> <b>ADDI-</b> <b>TIONAL</b> <input type="checkbox"/> <b>FEES</b> X\$ 9= <input type="checkbox"/> X40= <input type="checkbox"/> +135= <input type="checkbox"/> <b>TOTAL</b> <input type="checkbox"/>	
	Total * <input type="checkbox"/> Minus <input type="checkbox"/> ** <input type="checkbox"/> = <input type="checkbox"/>	* <input type="checkbox"/> Minus <input type="checkbox"/> *** <input type="checkbox"/> = <input type="checkbox"/>	* <input type="checkbox"/> Minus <input type="checkbox"/> *** <input type="checkbox"/> = <input type="checkbox"/>	<b>RATE</b> <input type="checkbox"/> <b>ADDI-</b> <b>TIONAL</b> <input type="checkbox"/> <b>FEES</b> X\$18= <input type="checkbox"/> X80= <input type="checkbox"/> +270= <input type="checkbox"/> <b>TOTAL</b> <input type="checkbox"/> <b>ADDI.</b> <input type="checkbox"/>	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>					
<b>AMENDMENT C</b>	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	<b>RATE</b> <input type="checkbox"/> <b>ADDI-</b> <b>TIONAL</b> <input type="checkbox"/> <b>FEES</b> X\$ 9= <input type="checkbox"/> X40= <input type="checkbox"/> +135= <input type="checkbox"/> <b>TOTAL</b> <input type="checkbox"/>	
	Total * <input type="checkbox"/> Minus <input type="checkbox"/> ** <input type="checkbox"/> = <input type="checkbox"/>	* <input type="checkbox"/> Minus <input type="checkbox"/> *** <input type="checkbox"/> = <input type="checkbox"/>	* <input type="checkbox"/> Minus <input type="checkbox"/> *** <input type="checkbox"/> = <input type="checkbox"/>	<b>RATE</b> <input type="checkbox"/> <b>ADDI-</b> <b>TIONAL</b> <input type="checkbox"/> <b>FEES</b> X\$18= <input type="checkbox"/> X80= <input type="checkbox"/> +270= <input type="checkbox"/> <b>TOTAL</b> <input type="checkbox"/> <b>ADDI.</b> <input type="checkbox"/>	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>					
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.					